

# CALIFORNIA CHILD CUSTODY PROJECT

Sponsored by the Statewide Office of Family Court Services  
Administrative Office of the Courts, Judicial Council of California

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## COUNSELOR REPORT CHILD CUSTODY AND VISITATION MEDIATION SESSION

### **WHO YOU MET WITH IN THE SESSION:**

*Please complete this form only for child custody and visitation mediation sessions in which you meet with both parents or you have a separate session with each parent because of domestic violence.*

### **WHEN TO COMPLETE THIS FORM:**

*Please fill out one Counselor Report after each child custody and visitation mediation session that you have completed with both parents or after you have completed separate meetings with each parent because of domestic violence.*

### **WHAT TO RETURN IN THE PACKET:**

*Please return all materials for this family in the counselor's packet, and check off below what you are returning:*

- ☐ Mother's Mediation Client Profile OR ☐ Mother's Non-response Form
- ☐ Father's Mediation Client Profile OR ☐ Father's Non-response Form
- ☐ Mother's Address Form
- ☐ Father's Address Form
- ☐ Counselor Report - Child Custody and Visitation Mediation Session
- ☐ Counselor Service Report - All Sessions

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## FCS/COURT PROCEDURES

- (6-13) 1. Date of session: \_\_\_\_/\_\_\_\_/\_\_\_\_ ➔ If parents were seen separately on different dates due to  
(14-21) domestic violence, date of first meeting: \_\_\_\_/\_\_\_\_/\_\_\_\_
- (22) 2. Had this family been to family court services for mediation before today's session?  
[1] ☐ Yes ➔ Number of times excluding today's session: \_\_\_\_ (Please count separate meetings as  
[0] ☐ No one session only.) (23-24)  
[9] ☐ Don't know
- (25) 3. Was the family in mediation today to modify a previous court order?  
[1] ☐ Yes  
[0] ☐ No  
[9] ☐ Don't know
- (26) 4. What orientation did the clients receive about mediation? (Please check all that apply.)  
[1] ☐ Briefed at the beginning of the session  
(27) [1] ☐ Attended a group orientation meeting  
(28) [1] ☐ Viewed a videotape  
(29) [1] ☐ Received printed information  
(30) [1] ☐ Other: (Please specify) (23-24)  
(31) [1] ☐ No orientation  
(32) [1] ☐ Don't know

5. Whom did you meet with today? *(Please check all that apply.)*

- (33) ☐ Mother and father together
- (34) ☐ Mother separately ➡
- (35) ☐ Father separately ➡ a. Why did you meet with one/both parents alone?
- (36) ☐ Domestic violence restraining order
- (37) ☐ No restraining order, but domestic violence concerns
- (38) ☐ Speaker phone mediation
- (39) ☐ Routinely meet with each parent alone as part of the mediation
- (40) ☐ Both parents were scheduled, and one parent did not appear
- ➡Please do not complete or return this form. Complete only the  
Counselor Service Report - All Sessions**
- (41) ☐ Other: *(Please specify)*

6. Were other special domestic violence procedures used in today's session\*?

- (42) ☐ No domestic violence
- ☐ No
- ☐ Don't know
- (43) ☐ Yes ➡ a. Please check which procedures were used:
- (44) ☐ Support person was in session
- (45) ☐ Co-mediated
- (46) ☐ Bailiff monitored the session
- (47) ☐ Bailiff patrolled the office area
- ☐ Other: *(Please specify)*

7. Have any of the above special domestic violence procedures been used prior to today's session?

- (48) ☐ No domestic violence
- ☐ Yes
- ☐ No
- ☐ Don't know

8. Other procedures used or services provided in today's session: *(Please check all that apply.)*

- (49) ☐ Disabled person accommodations
- (50) ☐ Outside sources consulted (CPS reports, police reports, school records)
- (51) ☐ Referrals provided by your office
- (52) ☐ Mediator conducted session in a language other than English
- (53) ☐ Translator was present during the session
- (54) ☐ Other: *(Please specify)*
- (55) ☐ NONE

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\* "Today's session" refers to a mediation with both parents present or the combination of two separate meetings conducted due to domestic violence.

## FAMILY ISSUES

9. Have any allegations been made either before or during session?

(56)

☐ No → Skip to Q10

☐ Yes → Please check all that apply.

	Who is alleged to have done this?			
	Father	Mother	An individual associated with father	An individual associated with mother
<b>Treatment of child:</b>				
Child neglect .....	<input type="checkbox"/> (57)	<input type="checkbox"/> (58)	<input type="checkbox"/> (59)	<input type="checkbox"/> (60)
Child abduction .....	<input type="checkbox"/> (61)	<input type="checkbox"/> (62)	<input type="checkbox"/> (63)	<input type="checkbox"/> (64)
Physical abuse of child .....	<input type="checkbox"/> (65)	<input type="checkbox"/> (66)	<input type="checkbox"/> (67)	<input type="checkbox"/> (68)
Sexual abuse of child .....	<input type="checkbox"/> (69)	<input type="checkbox"/> (70)	<input type="checkbox"/> (71)	<input type="checkbox"/> (72)
Emotional abuse of child.....	<input type="checkbox"/> (73)	<input type="checkbox"/> (74)	<input type="checkbox"/> (75)	<input type="checkbox"/> (76)
Child support not paid .....	<input type="checkbox"/> (77)	<input type="checkbox"/> (78)	-----	-----
Parent does not show for visitation.....	<input type="checkbox"/> (79)	<input type="checkbox"/> (80)	-----	-----
<b>Parental relationship:</b>				
Parent prevents visitation.....	<input type="checkbox"/> (81)	<input type="checkbox"/> (82)	-----	-----
Maligning the other parent in front of the children.....	<input type="checkbox"/> (83)	<input type="checkbox"/> (84)	<input type="checkbox"/> (85)	<input type="checkbox"/> (86)
Harassing the other parent .....	<input type="checkbox"/> (87)	<input type="checkbox"/> (88)	<input type="checkbox"/> (89)	<input type="checkbox"/> (90)
Domestic violence between parents .....	<input type="checkbox"/> (91)	<input type="checkbox"/> (92)	-----	-----
<b>Environment:</b>				
Violence involving others .....	<input type="checkbox"/> (93)	<input type="checkbox"/> (94)	<input type="checkbox"/> (95)	<input type="checkbox"/> (96)
Drug abuse .....	<input type="checkbox"/> (97)	<input type="checkbox"/> (98)	<input type="checkbox"/> (99)	<input type="checkbox"/> (100)
Alcohol abuse .....	<input type="checkbox"/> (101)	<input type="checkbox"/> (102)	<input type="checkbox"/> (103)	<input type="checkbox"/> (104)
Criminal activity.....	<input type="checkbox"/> (105)	<input type="checkbox"/> (106)	<input type="checkbox"/> (107)	<input type="checkbox"/> (108)
<b>Other: (Please specify)</b>				
_____	<input type="checkbox"/> (109)	<input type="checkbox"/> (110)	<input type="checkbox"/> (111)	<input type="checkbox"/> (112)
_____	<input type="checkbox"/> (113)	<input type="checkbox"/> (114)	<input type="checkbox"/> (115)	<input type="checkbox"/> (116)

10. What issues were covered in the discussion about custody and/or visitation?

**Changes in the situation:**

- (117) ☐ None  
☐ Yes → Please check all that apply.

	<u>Which parent?</u>	
	Mother	Father
Parent is moving out of the area.....	<input type="checkbox"/> (118)	<input type="checkbox"/> (119)
Parent has a new spouse/partner.....	<input type="checkbox"/> (120)	<input type="checkbox"/> (121)
Formerly absent/uninvolved parent wants more involvement.....	<input type="checkbox"/> (122)	<input type="checkbox"/> (123)
Other: (Please specify).....	<input type="checkbox"/> (124)	<input type="checkbox"/> (125)

**Parent requests:**

- (126) ☐ None  
☐ Yes → Please check all that apply.

	<u>Which parent is requesting?</u>	
	Mother	Father
Supervised visitation initiated/continued .....	<input type="checkbox"/> (127)	<input type="checkbox"/> (128)
Supervised visitation stopped .....	<input type="checkbox"/> (129)	<input type="checkbox"/> (130)
Neutral pickup point .....	<input type="checkbox"/> (131)	<input type="checkbox"/> (132)
No substance (including tobacco) use during visitation. ....	<input type="checkbox"/> (133)	<input type="checkbox"/> (134)
Drug testing.....	<input type="checkbox"/> (135)	<input type="checkbox"/> (136)
Nonremoval of child from state.....	<input type="checkbox"/> (137)	<input type="checkbox"/> (138)
Psychological evaluation of other parent .....	<input type="checkbox"/> (139)	<input type="checkbox"/> (140)
Other: (Please specify).....	<input type="checkbox"/> (141)	<input type="checkbox"/> (142)

**Child issues:**

- (143) ☐ None  
☐ Yes → Please check all that apply.
- (144) ☐ Behavior problems  
(145) ☐ Emotional adjustment  
(146) ☐ Developmental needs  
(147) ☐ Substance abuse  
(148) ☐ Medical needs  
(149) ☐ School performance  
(150) ☐ Child refuses to visit  
(151) ☐ Other child preferences about residence and visitation  
(152) ☐ Other: (Please specify)

**Racial or cultural issues:**

- (153) ☐ None  
☐ Yes → (Please specify)

**Co-parenting issues:**

- (154) ☐ None  
☐ Yes → (Please specify)

***The purpose of next two pages is to be clear about what was at issue in the mediation, what parenting plans preceded mediation, and what parenting plans were established in mediation.***

*On pages 5 and 6, the same questions apply to each issue. The questions appear in the first column on each page. Please check the answer to each question in columns 11-13 (page 5) and 14-17 (page 6).*

### CASE STATUS AT THE BEGINNING OF THE SESSION

	11. Legal custody	12. Physical custody	13. Primary residence
<b>a.</b> What was the status of each issue at the beginning of today's session? <i>(Please check one response in each column.)</i> No court order or agreement between parents.....	[1] <input type="checkbox"/> Skip to Q12	[1] <input type="checkbox"/> Skip to Q13	[1] <input type="checkbox"/> Skip to Q14
Request for modification of a court order.....	[2] <input type="checkbox"/> (155)	[2] <input type="checkbox"/> (167)	[2] <input type="checkbox"/> (179)
Review of parenting plan.....	[3] <input type="checkbox"/>	[3] <input type="checkbox"/>	[3] <input type="checkbox"/>
Not at issue - current court order.....	[4] <input type="checkbox"/>	[4] <input type="checkbox"/>	[4] <input type="checkbox"/>
Not at issue - agreement between parents (not a court order).....	[5] <input type="checkbox"/>	[5] <input type="checkbox"/>	[5] <input type="checkbox"/>
<b>b.</b> If there was a court order or agreement, what were the terms? <i>(Please check one response in each column.)</i>	[1] <input type="checkbox"/> To mom	[1] <input type="checkbox"/> To mom	[1] <input type="checkbox"/> Mostly with mom
	[2] <input type="checkbox"/> To dad (156)	[2] <input type="checkbox"/> To dad (168)	[2] <input type="checkbox"/> Mostly with dad (180)
	[3] <input type="checkbox"/> Joint	[3] <input type="checkbox"/> Joint	[3] <input type="checkbox"/> Part of the time with each parent
	[4] <input type="checkbox"/> Split	[4] <input type="checkbox"/> Split	[4] <input type="checkbox"/> Split
<b>c.</b> What methods were used to reach the court order or agreement? <i>(Please check all that apply in each column.)</i>			
Parents on their own.....	[1] <input type="checkbox"/> (157)	[1] <input type="checkbox"/> (169)	[1] <input type="checkbox"/> (181)
Lawyers.....	[1] <input type="checkbox"/> (158)	[1] <input type="checkbox"/> (170)	[1] <input type="checkbox"/> (182)
Agreement in court-connected mediation.....	[1] <input type="checkbox"/> (159)	[1] <input type="checkbox"/> (171)	[1] <input type="checkbox"/> (183)
Mediator recommendation to the court..	[1] <input type="checkbox"/> (160)	[1] <input type="checkbox"/> (172)	[1] <input type="checkbox"/> (184)
Custody evaluation/investigation.....	[1] <input type="checkbox"/> (161)	[1] <input type="checkbox"/> (173)	[1] <input type="checkbox"/> (185)
Court hearing.....	[1] <input type="checkbox"/> (162)	[1] <input type="checkbox"/> (174)	[1] <input type="checkbox"/> (186)
Ex-parte orders.....	[1] <input type="checkbox"/> (163)	[1] <input type="checkbox"/> (175)	[1] <input type="checkbox"/> (187)
Private mediation.....	[1] <input type="checkbox"/> (164)	[1] <input type="checkbox"/> (176)	[1] <input type="checkbox"/> (188)
Other.....	[1] <input type="checkbox"/> Specify (165)	[1] <input type="checkbox"/> Specify (177)	[1] <input type="checkbox"/> Specify (189)
Don't know.....	[1] <input type="checkbox"/> (166)	[1] <input type="checkbox"/> (178)	[1] <input type="checkbox"/> (190)

## CASE STATUS AT THE END OF THE SESSION

	14. Legal custody	15. Physical custody	16. Primary residence	17. Time with each parent
<p>a. What was the status of each issue at the end of today's session? <i>(Please check one response in each column.)</i></p> <p>Was not at issue.....</p> <p>Not yet decided.....</p> <p>Temporary agreement.....</p> <p>Final agreement.....</p> <p>Mediator recommended.....</p>	<p>[1] <input type="checkbox"/> Skip to Q15</p> <p>[2] <input type="checkbox"/> Skip to Q14d</p> <p>[3] <input type="checkbox"/> (191)</p> <p>[4] <input type="checkbox"/></p> <p>[5] <input type="checkbox"/></p>	<p>[1] <input type="checkbox"/> Skip to Q16</p> <p>[2] <input type="checkbox"/> Skip to Q15d</p> <p>[3] <input type="checkbox"/> (201)</p> <p>[4] <input type="checkbox"/></p> <p>[5] <input type="checkbox"/></p>	<p>[1] <input type="checkbox"/> Skip to Q17</p> <p>[2] <input type="checkbox"/> Skip to Q16d</p> <p>[3] <input type="checkbox"/> (211)</p> <p>[4] <input type="checkbox"/></p> <p>[5] <input type="checkbox"/></p>	<p>[1] <input type="checkbox"/> Skip to Q18</p> <p>[2] <input type="checkbox"/> Skip to Q17d</p> <p>[3] <input type="checkbox"/> (221)</p> <p>[4] <input type="checkbox"/></p> <p>[5] <input type="checkbox"/></p>
<p>b. What are the terms? <i>(Please check one response in each column.)</i></p>	<p>[1] <input type="checkbox"/> To mom</p> <p>[2] <input type="checkbox"/> To dad (192)</p> <p>[3] <input type="checkbox"/> Joint</p> <p>[4] <input type="checkbox"/> Split</p>	<p>[1] <input type="checkbox"/> To mom</p> <p>[2] <input type="checkbox"/> To dad (202)</p> <p>[3] <input type="checkbox"/> Joint</p> <p>[4] <input type="checkbox"/> Split</p>	<p>[1] <input type="checkbox"/> Mostly with mom</p> <p>[2] <input type="checkbox"/> Mostly with dad (212)</p> <p>[3] <input type="checkbox"/> Part of the time with each parent</p> <p>[4] <input type="checkbox"/> Split</p>	
<p>c. In the first 4 weeks (28 days) after the plan goes into effect, how many nights will the child(ren) spend with each parent, and how many days will they spend at least some time with each parent? <i>(For split, please mark the box "Different for each child." You need not fill in time.)</i></p>				<p>_____/_____/w/mom nights days (222-223) (224-225)</p> <p>_____/_____/w/dad nights days (226-227) (228-229)</p> <p>[1] <input type="checkbox"/> Different for each child (230)</p>
<p>d. What are the next steps? <i>(Please check all that apply in each column.)</i></p>	<p>No court-connected next steps.... [1] <input type="checkbox"/> (193)</p> <p>FCS review scheduled..... [1] <input type="checkbox"/> (194)</p> <p>Further court-connected mediation..... [1] <input type="checkbox"/> (195)</p> <p>Mediator recommendation - not yet formulated..... [1] <input type="checkbox"/> (196)</p> <p>Custody evaluation/ investigation..... [1] <input type="checkbox"/> (197)</p> <p>Court hearing..... [1] <input type="checkbox"/> (198)</p> <p>Other..... [1] <input type="checkbox"/> Specify (199)</p> <p>Don't know..... [1] <input type="checkbox"/> (200)</p>	<p>[1] <input type="checkbox"/> (203)</p> <p>[1] <input type="checkbox"/> (204)</p> <p>[1] <input type="checkbox"/> (205)</p> <p>[1] <input type="checkbox"/> (206)</p> <p>[1] <input type="checkbox"/> (207)</p> <p>[1] <input type="checkbox"/> (208)</p> <p>[1] <input type="checkbox"/> Specify (209)</p> <p>[1] <input type="checkbox"/> (210)</p>	<p>[1] <input type="checkbox"/> (213)</p> <p>[1] <input type="checkbox"/> (214)</p> <p>[1] <input type="checkbox"/> (215)</p> <p>[1] <input type="checkbox"/> (216)</p> <p>[1] <input type="checkbox"/> (217)</p> <p>[1] <input type="checkbox"/> (218)</p> <p>[1] <input type="checkbox"/> Specify (219)</p> <p>[1] <input type="checkbox"/> (220)</p>	<p>[1] <input type="checkbox"/> (231)</p> <p>[1] <input type="checkbox"/> (232)</p> <p>[1] <input type="checkbox"/> (233)</p> <p>[1] <input type="checkbox"/> (234)</p> <p>[1] <input type="checkbox"/> (235)</p> <p>[1] <input type="checkbox"/> (236)</p> <p>[1] <input type="checkbox"/> Specify (237)</p> <p>[1] <input type="checkbox"/> (238)</p>

18. Special visitation provisions agreed upon or recommended: *(Please check all that apply.)*

- (239) ☐ Supervised visitation initiated/continued  
 (240) ☐ Supervised visitation stopped  
 (241) ☐ Neutral pickup point  
 (242) ☐ No substance (including tobacco) use during visitation  
 (243) ☐ Nonremoval of child from state  
 (244) ☐ Restrictions on driving with children  
 (245) ☐ Other: *(Please specify)*  
 (246) ☐ NONE

19. Other provisions agreed upon or recommended: *(Please check all that apply.)*

- (247) ☐ Parent education class  
 (248) ☐ Drug testing  
 (249) ☐ Anger management counseling  
 (250) ☐ Other counseling for parents and/or children  
 (251) ☐ Psychological evaluation of a parent  
 (252) ☐ Other: *(Please specify)*  
 (253) ☐ NONE

## COUNSELOR OBSERVATIONS

20. As the mediator for this family, how do you feel the session went for the parents? *(Please circle the number that best indicates your assessment.)*

a. The session was:

	Extremely productive										Not productive at all
(254-255)	1	2	3	4	5	6	7	8	9	10	

b. We worked on issues that were:

	Extremely difficult										Not difficult at all
(256-257)	1	2	3	4	5	6	7	8	9	10	

c. The level of tension or emotional intensity was:

	Extremely high										Not high at all
(258-259)	1	2	3	4	5	6	7	8	9	10	

d. Further mediation would be:

	Extremely productive										Not productive at all	Does not apply: Parents reached agreement
(260-261)	1	2	3	4	5	6	7	8	9	10		<input type="checkbox"/>

21. How do you think the parents will evaluate the process today?

	Mother	Father
Very positive	[1] <input type="checkbox"/>	[1] <input type="checkbox"/>
Positive	[2] <input type="checkbox"/>	[2] <input type="checkbox"/>
Negative	[3] <input type="checkbox"/> (262)	[3] <input type="checkbox"/> (263)
Very negative	[4] <input type="checkbox"/>	[4] <input type="checkbox"/>
Can't guess	[9] <input type="checkbox"/>	[9] <input type="checkbox"/>

22. Why do you think that they will evaluate the process that way?

(264)

## COUNSELOR BACKGROUND

23. Your gender Co-mediator's gender

[2] <input type="checkbox"/> (265)	[2] <input type="checkbox"/> (266)	Male
[1] <input type="checkbox"/>	[1] <input type="checkbox"/>	Female

24. Your ethnic background Co-mediator's ethnic background

[1] <input type="checkbox"/>	[1] <input type="checkbox"/>	American Indian or Alaskan Native
[3] <input type="checkbox"/>	[3] <input type="checkbox"/>	African-American/Black, not of Hispanic Origin
[2] <input type="checkbox"/>	[2] <input type="checkbox"/>	Asian or Pacific Islander
[5] <input type="checkbox"/> (267)	[5] <input type="checkbox"/> (268)	Latino/Chicano/Hispanic
[4] <input type="checkbox"/>	[4] <input type="checkbox"/>	White, not of Hispanic Origin
[7] <input type="checkbox"/>	[7] <input type="checkbox"/>	Other: <i>(Please specify)</i>
[8] <input type="checkbox"/>	[8] <input type="checkbox"/>	More than one of the above: <i>(Please specify)</i>